FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

1077206

FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB	APP	ROV	'AL

SEC USE ONLY

hours per form...... 16.00



Name of Offering (check if this is an		00020	99 1			
Offering of Limited Partnership Interests			· .			
Filing Under (Check box(es) that apply):	Section	1 4(6)	OE			
Type of Filing:				le:	RECEIVED	
	A. BASI	C IDENTIFICAT	ION DATA	13/	:	100
1. Enter the information requested about to	ne issuer			~	IAN 7 2 ZI	106 //
Name of Issuer	mendment and name l	has changed, and in	dicate change.			
Meridian Horizon Fund II, L.P.					156	
Address of Executive Offices		(Number and Stree	et, City, State, Zip Co			ncluding Area Code)
c/o Meridian Capital Partners, Inc., 20 Cor	porate Woods Boulev	ard, 4 th Floor, Alba	ny, NY 12211	(518)	432-1600//	
Address of Principal Offices (if different from	de) Telepi	Telephone Number (Including Area Code)				
		·				
Brief Description of Business: Investme	ent in securities throu	gh a diverse group	of investment man	agers.	111	UUESSED
Type of Business Organization					NI F	D 0 0 2006
☐ corporation	🛛 limited	partnership, already	formed	other (pl	ease specify)	
☐ business trust	☐ limited	partnership, to be fo	med		0 U 151	TOMSON
**************************************		Month	Yea		9.3.	NANCIAL
Actual or Estimated Date of Incorporation or	Organization:	1 1	9	8		☐ Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S.	Postal Service Abbro	eviation for State;			
		N for Canada; FN fo	or other foreign jurisd	iction)	DE	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Company and the company of the compa		A. BASIC IL	ENTIFICATION DATA	A second	
Each beneficial ow Each executive offi	ne issuer, if the iss ner having the pov cer and director o	suer has been organized wit wer to vote or dispose, or dir		f, 10% or more of ing partners of par	a class of equity securities of the issuer; tnership issuers; and
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first,	if individual):	Meridian Capital Part	ners, Inc.		
Business or Residence Add	ress (Number and	Street, City, State, Zip Cod	e): 20 Corporate Woo	ds Boulevard, 4 th	Floor, Albany, NY 12211
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	Lawrence, William H.			
Business or Residence Add Floor, Albany, NY 12211	ress (Number and	Street, City, State, Zip Cod	e): c/o Meridian Capit	al Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	⊠ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):	Halldin, Donald J.			
Business or Residence Add Floor, Albany, New York 1		Street, City, State, Zip Cod	e): c/o Meridian Capit	al Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	□ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	f individual):	Sica, John			
Business or Residence Add Floor, Albany, NY 12211	ress (Number and	Street, City, State, Zip Code	e): c/o Meridian Capita	al Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first,	f individual):	Hickey, Timothy M.			
Business or Residence Addi Floor, Albany, NY 12211	ess (Number and	Street, City, State, Zip Code	e): c/o Meridian Capita	al Partners, Inc.,	20 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Smith, Laura K.			·
Business or Residence Addi Floor, Albany, NY 12211	ess (Number and	Street, City, State, Zip Code	e): c/o Meridian Capita	l Partners, Inc., 2	0 Corporate Woods Boulevard, 4 th
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code	e):	· · · · · · · · · · · · · · · · · · ·	
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	findividual):				
Business or Residence Addr	ess (Number and	Street, City, State, Zip Code	e):		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? ☐ Yes 🖾 No Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?..... \$1,000,000* *may be waived Does the offering permit joint ownership of a single unit? Yes □ No 3. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)..... ☐ All States □ [AK] \square [AZ] \square [AR] \square [CA] \square [CO] \square [CT] \square [DE] \square [DC] \square [FL] \square [GA] \square [HI] □ [KS] □ [KY] □ [LA] ☐ [ME] ☐ [MD] ☐ [MA] ☐ [MI] □ [MN] [NT] [NE] [NV] [NH] [NJ] □ [OR] □ [PA] [SC] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)...... ☐ All States \square [AK] \square [AZ] \square [AR] \square [CA] \square [CO] \square [CT] \square [DE] \square [DC] \square [FL] \square [GA] \square [HI] □ [ID] \square [KS] \square [KY] \square [LA] \square [ME] \square [MD] \square [MA] \square [MI] □ [IA] [MN] [MS] [MO] [IV] [SC] [SD] [TN] [TN] [UT] [UT] [VA] [WA] [WA] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)..... ☐ All States \square [AZ] \square [AR] \square [CA] \square [CO] \square [CT] \square [DE] \square [DC] \square [FL] \square [GA] \square [HI] □ [AL] ☐ [AK] □ [IN] □ [IA] [KS] [KY] □ [LA] [ME] ☐ [MD] ☐ [MA] ☐ [MI] [MN] [MS] [MO] \square [NM] \square [NY] \square [NC] \square [ND] \square [OH] \square [OK] \square [OR] \square [PA] □ [RI] (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

B. INFORMATION ABOUT OFFERING

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Į.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Aiready Sold
	Debt	. <u>\$</u>	0	\$	0
	Equity	\$	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	. <u>\$</u>	0	<u>\$</u> _	0
	Partnership Interests	\$	1,000,000,000	\$	88,312,868
	Other (Specify)	. \$	0	\$	0
	Total	\$	1,000,000,000	\$	88,312,868
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		91	\$	88,312,868
	Non-accredited Investors			\$	0
	Total (for filings under Rule 504 only)		0	\$	0
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1.				
	Type of Offering		Types of Security		Dollar Amount Sold
	Rule 505	·	n/a	\$	n/a
	Regulation A		n/a	<u>\$</u>	n/a
	Rule 504		n/a	\$	n/a
	Total		n/a	<u>\$</u>	n/a
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		🗆	\$	0
	Printing and Engraving Costs	·····	🗆	\$	0
	Legal Fees		🛛	\$	10,000
	Accounting Fees		🛛	\$	60,000
	Engineering Fees		🗆	\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify))			\$	0
	Total			\$	70,000

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXP	ENSES	AND US	E OF P	ROC	EEDS		778418
4	b. Enter the difference between the aggregate offering price given in response to Part Question 1 and total expenses furnished in response to Part C–Question 4.a. This differ "adjusted gross proceeds to the issuer."	ence is the				\$		999,930,000
5	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed used for each of the purposes shown. If the amount for any purpose is not known, furnis estimate and check the box to the left of the estimate. The total of the payments listed me the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b.	h an ust equal			·			
			C Di	yments to Officers, rectors & Affiliates			. F	Payments to Others
	Salaries and fees		\$	· · ·			\$	
	Purchase of real estate		\$				\$	
	Purchase, rental or leasing and installation of machinery and equipment		\$				\$	
	Construction or leasing of plant buildings and facilities		\$				\$	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issu						•	
	pursuant to a merger		\$				\$	
	Repayment of indebtedness		\$				<u>\$</u>	
	Working capital		\$				\$	
	Other (specify): Investment in Partnership Interests		\$			\boxtimes	\$	999,930,000
			\$				<u>\$</u>	
	Column Totals		\$			\boxtimes	\$	999,930,000
	Total payments Listed (column totals added)			\boxtimes	\$	99	9,930,0	000
	D. FEDERAL SIGNATU	ine.						
					N.	- 14		
co	is issuer has duly caused this notice to be signed by the undersigned duly authorized pers nstitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Com the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	son. If this mission, u	notice is till oon written	ed under request c	Rule t of its si	taff, the	inform	ing signature lation furnished
	suer (Print or Type) eridian Horizon Fund II, L.P. Signature	M	12		Da	te	10	106
Ву	rime of Signer (Print or Type) r: Meridian Capital Partners, Inc., General Partner r: Laura K. Smith Title of Signer (Print or Type) Managing Director - Operati	ons	-				*	, – ·
					<u>-</u>			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	The second substitute was substituted by the substitute of the sub	and the second s						
		E. STATE SIGNATURE						
1.	Is any party described in 17 CFR 230.262 presen provisions of such rule?		.□ Yes □ No					
	See App	pendix, Column 5, for state response.						
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.							
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.	•	r is familiar with the conditions that must be satisfied to be entitled te is filed and understands that the issuer claiming the availability of atisfied.	•					
	suer has read this notification and knows the content rized person.	s to be true and has duly caused this notice to be signed on its beh	alf by the undersigned duly					
Issuer	(Print or Type)	Signature & IC	Date					
	ian Horizon Fund II, L.P.	JIMMIT C	11066					
Name	of Signer (Print or Type)	Title of Signer (Print or Type)						
	leridian Capital Partners, Inc., General Partner aura K. Smith	Managing Director - Operations						

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1		2	3			5	;			
•	to non-a investor	to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		amount purc	ivestor and hased in State – Item 2)	·	under Sta (if yes, explana waiver o	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)	
State	Yes	No.	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA		х	LP Interests	1	\$1,564,000	. 0	\$0		X	
со										
СТ										
DE										
DC					·					
FL		Х	LP Interests	12	\$5,994,907	0	\$0		×	
GA		Х	LP Interests	3	\$2,700,000	0	\$0		Х	
н									1	
ID										
IL								:		
IN		Х	LP Interests	_ 1	\$1,000,000	0	\$0		Х	
IA										
KS		Х	LP Interests	1	\$250,000	0	\$0		х	
KY										
LA		х	LP Interests	19	\$30,160,466	0	\$0		×	
ME										
MD		Х	LP Interests	2	\$1,116,500	0	\$0		X	
MA										
МІ		Х	LP Interests	. 1	\$1,000,000	0	. \$0		х	
MN	···									
MS	······································									
мо							· · · · · · · · · · · · · · · · · · ·			
мт										
NE										
NV										
NH				·						
NJ		Х	LP Interests	1	\$978,116	0	\$0		X	

i tak		i pari	Togate Military (1994) (A) Proposition of the Commission of the Co	AP	PENDIX					
1		2	3			4		5		
	to non-a	to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Amount pure	nvestor and hased in State – Item 2)		under Sta (if yes, explana waiver g	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)	
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NM										
NY		Х	LP Interests	17	\$13,364,512	0	\$0		Х	
NC		Х	LP Interests	2	\$1,000,001	0	\$0		Х	
ND										
ОН		Х	LP Interests	1	\$1,500,000	0	\$0		Х	
ок										
OR										
PA		Х	LP Interests	21	\$17,155,049	0	\$0		· X	
RI										
sc										
SD										
TN		Х	LP Interests	2	\$3,200,000	0 .	\$0		X	
TX		Х	LP Interests	. 3	\$2,024,167	0	\$0		Х	
UT										
VT										
VA		Х	LP Interests	1	\$2,800,000	0	\$0		X	
WA		Х	LP Interests	3	\$2,505,149	0	\$0	·	X	
wv					·					
WI										
WY										
Non- US										